



UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
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Bib Data Sheet

CONFIRMATION NO. 1854

SERIAL NUMBER 09/644,923	FILING DATE 08/23/2000 RULE	CLASS 212	GROUP ART UNIT 3652	ATTORNEY DOCKET NO. RIV6172P	
APPLICANTS Darryl Scott Burkett, Barrington, IL; ** CONTINUING DATA ***** ** FOREIGN APPLICATIONS ***** IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 10/05/2000					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>		STATE OR COUNTRY IL	SHEETS DRAWING 6	TOTAL CLAIMS 16	INDEPENDENT CLAIMS 2
ADDRESS Polit & Associates, LLC Randal T. Erickson 3333 Warrenville Road Suite 520 Lisle, IL 60532					
TITLE Trailer-mounted crane apparatus					
FILING FEE RECEIVED 420	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		



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Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		STATE OR COUNTRY IL	SHEETS DRAWING 6	TOTAL CLAIMS 16	INDEPENDENT CLAIMS 2
ADDRESS Polit & Associates 3333 Warrenville Road Suite 520 Lisle, IL 60532					
TITLE Trailer-mounted crane apparatus					
FILING FEE RECEIVED 561	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		



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IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 10/05/2000				
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				INDEPENDENT CLAIMS 2
ADDRESS 026304				
TITLE Trailer-mounted crane apparatus				
FILING FEE RECEIVED 465	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	